

CSD 1099 [12/01/15]

Name, Address, Telephone No. & I.D. No.

Marco A. Torres 214805

550 West C. Street

Suite 1600

San Diego, CA 92101

619-849-8849

214805

UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF CALIFORNIA
325 West "F" Street, San Diego, California 92101-6991

In Re

Abraham Dolamakian

Mariam Dolamakian

BANKRUPTCY NO. **16-04156**

Debtor.

BALANCE OF SCHEDULES, STATEMENTS, AND/OR CHAPTER 13 PLAN

Presented are the original with the number of copies required by CSD 1800 Administrative Procedures of the following [Check one or more boxes as appropriate]:

- Schedules A/B - J
 Statement of Financial Affairs
 Summary of Schedules (Includes Statistical Summary of Certain Liabilities)
 Summary of Your Assets and Liabilities and Certain Statistical Information Schedules
 Chapter 7 Statement of Current Monthly Income
 Chapter 7 Statement of Exemption from Presumption of Abuse Under § 707(b)(2)
 Chapter 7 Means Test Calculation
 Chapter 11 Statement of Your Current Monthly Income
 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period
 Chapter 13 Calculation of Your Disposable Income
 Chapter 13 Plan
 Schedule of Real and/or Personal Property
 Schedule of Property Claimed Exempt
 Creditors Holding Secured Claims by Property
 Creditors Holding Unsecured Priority and/or Non-priority Claims:
 Schedule of Executory Contracts & Unexpired Leases
 Schedule of Co-Debtors
 Income of Individual Debtor(s)
 Expenses of Individual Debtor(s)
 Expenses for Separate Household of Debtor 2

If additional creditors are added at this time, the following are required:

1. Electronic media required, see CSD 1007, containing only the added names and addresses (when the Balance of Schedules are filed on paper).
2. Local Form CSD 1101, Notice

Dated: July 20, 2016

Signed /s/ Marco A. Torres
Attorney for Debtor

I [We] Abraham Dolamakian and Mariam Dolamakian, the debtor(s), hereby declare under penalty of perjury that the information set forth in the balance of schedules and/or chapter 13 plan attached hereto, consisting of _____ pages, and on the creditor matrix, if any, is true and correct.

Dated: July 20, 2016

/s/ Abraham Dolamakian

*Debtor Abraham Dolamakian

/s/ Mariam Dolamakian

*Joint Debtor Mariam Dolamakian

r*Pursuant to LBR 5005-4(C), the original debtor signature(s) in a scanned format is required.

INSTRUCTIONS

1. Local Form CSD 1101, *Notice to Creditors of The Above-Named Debtor Added by Amendment or Balance of Schedules*, may be used to notify any added entity. When applicable, copies of the following notices must accompany the notice: Order for and Notice of Section 341(a) Meeting, Discharge of Debtor, Notice of Order Confirming Plan, and Proof of Claim.
2. If not filed previously and this is an ECF case, the *Declaration Re: Electronic Filing of Petition, Schedules & Statements* (Local Form CSD 1801) must be filed in accordance with LBR 5005-4(c).
3. If this is a Chapter 11 case, each member of any committee appointed must be served this Balance of Schedules.

PROOF OF SERVICE

I, whose address appears below, certify:

That I am, and at all relevant times was, more than 18 years of age;

I served a true copy of this **Balance of Schedules and/or Chapter 13 Plan** on the following persons listed below via the following method(s):

1. To Be Served by the Court via Notice of Electronic Filing ("NEF"):

Under controlling Local Bankruptcy Rules(s) ("LBR"), the document(s) listed above will be served by the court via NEF and hyperlink to the document. On 7/20/2016, I checked the CM/ECF docket for this bankruptcy case or adversary proceeding and determined that the following person(s) are on the Electronic Mail Notice List to receive NEF transmission at the e-mail address(es) indicated and/or as checked below:

<input type="checkbox"/> Chapter 7 Trustee	<input type="checkbox"/> For Chapt 7, 11, & 12 cases:	<input type="checkbox"/> For ODD numbered 13 cases:	<input checked="" type="checkbox"/> For EVEN numbered Chapter 13 cases:
UNITED STATES TRUSTEE ustp.region15@usdoj.gov	THOMAS H. BILLINGSLEA, JR., TRUSTEE Billingslea@thb.coxatwork.com	DAVID L. SKELTON, TRUSTEE admin@ch13.sdccoxmail.com dskelton13@ecf.epiqsystems.com	

2. Served by United States Mail or Overnight Mail:

On 7/20/16 I served the following person(s) and/or entity(ies) at the last known address(es) In this bankruptcy case or adversary proceeding by placing a true and correct copy thereof in a sealed envelope in the United States Mail via 1) first class, postage prepaid, 2) certified mail with receipt number or 3) overnight mail service, addressed as follows: SEE ATTACHED LIST

3. Served by Personal Delivery, Facsimile Transmission or Electronic Mail:

Under Fed.R.Civ.P.5 and controlling LBR, on , I served the following person(s) and/or entity(ies) by personal delivery, or (for those who consented in writing to such service method), by facsimile transmission and/or electronic mail as follows:

I declare under penalty of perjury under the laws of the United States of America that the statements made in this proof of service are true and correct.

Executed on July 20, 2016
(Date)

/s/ Marco A. Torres
Marco A. Torres 214805
The Law Office of Marco A. Torres
550 West C. Street
Suite 1600
San Diego, CA 92101
Address

Ally Financial
Po Box 380901
Bloomington, MN 55438-0901

Bombay/Prism/Citibank
Po Box 20507
Attn: Centralized Bankruptcy
Kansas City, MO 64195-0507

Bosco Credit II, LLC
C/O The Wolf Firm, A Law Corporation
Attorneys to the Financial Services Indu
2955 Main Street, 2nd Floor
Irvine, CA 92614-2528

(p)BMW FINANCIAL SERVICES
CUSTOMER SERVICE CENTER
PO BOX 3608
DUBLIN OH 43016-0306

Bsi Financial Services
314 S Franklin Street
Titusville, PA 16354-2168

California FTB
PIT Bankruptcy
P.O. Box 2952
Sacramento, CA 95812-2952

California Republic Bk
1400 Newport Center Drive
Newport Beach, CA 92660-0943

Capital One
Po Box 30285
Salt Lake City, UT 84130-0285

Chase
Attn: Correspondence Dept
Po Box 15298
Wilmington, DE 19850-5298

Chase Bank
3415 Vision Dr.
Columbus, OH 43219-6009

Chase Mtg
Po Box 24696
Columbus, OH 43224-0696

DSRM National Bnk
Po Box 631
Amarillo, TX 79105-0631

Downey S & L
Pob 6060
Newport Beach, CA 92658-6060

Franklin Credit Mngmt Corp
PO Box 2300
Jersey City, NJ 07303-2300

(p)INTERNAL REVENUE SERVICE
CENTRALIZED INSOLVENCY OPERATIONS
PO BOX 7346
PHILADELPHIA PA 19101-7346

Kohls/Capital One
Po Box 3120
Milwaukee, WI 53201-3120

Mabt - Genesis Retail
Bankcard Services
Po Box 4477
Beaverton, OR 97076-4401

Progressive Management Systems
1521 W Cameron Ave
1st Floor
West Covina, CA 91790-2738

Santander Consumer USA
Po Box 961245
Fort Worth, TX 76161-0244

Synchrony Bank/Walmart
Po Box 965064
Orlando, FL 32896-5064

The Wolf Firm
2955 Main St., 2nd Flr.
Irvine, CA 92614-2528

(p)TOYOTA MOTOR CREDIT CORPORATION
PO BOX 8026
CEDAR RAPIDS IA 52408-8026

Visa Dept Store National Bank
Attn: Bankruptcy
Po Box 8053
Mason, OH 45040-8053

Abraham Dolamakian
11057 Paseo Castanada
La Mesa, CA 91941-7330

Fill in this information to identify your case:

Debtor 1	Abraham Dolamakian		
	First Name	Middle Name	Last Name
Debtor 2	Mariam Dolamakian		
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	SOUTHERN DISTRICT OF CALIFORNIA		
Case number (if known)	16-04156		

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets

		Your assets Value of what you own
1.	Schedule A/B: Property (Official Form 106A/B)	\$ 568,283.00
1a.	Copy line 55, Total real estate, from Schedule A/B.....	\$ 568,283.00
1b.	Copy line 62, Total personal property, from Schedule A/B.....	\$ 199,133.38
1c.	Copy line 63, Total of all property on Schedule A/B.....	\$ 767,416.38

Part 2: Summarize Your Liabilities

		Your liabilities Amount you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	\$ 598,161.30
2a.	Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i> ...	\$ 598,161.30
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	\$ 0.00
3a.	Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i>	\$ 0.00
3b.	Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i>	\$ 4,817.00
		Your total liabilities \$ 602,978.30

Part 3: Summarize Your Income and Expenses

4.	Schedule I: Your Income (Official Form 106I)	\$ 4,062.00
	Copy your combined monthly income from line 12 of <i>Schedule I</i>	\$ 4,062.00
5.	Schedule J: Your Expenses (Official Form 106J)	\$ 3,439.00
	Copy your monthly expenses from line 22c of <i>Schedule J</i>	\$ 3,439.00

Part 4: Answer These Questions for Administrative and Statistical Records

6. Are you filing for bankruptcy under Chapters 7, 11, or 13?

No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Yes

7. What kind of debt do you have?

Your debts are primarily consumer debts. *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. **From the Statement of Your Current Monthly Income:** Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$ 3,365.02

9. **Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:**

From Part 4 on Schedule E/F, copy the following:	Total claim
9a. Domestic support obligations (Copy line 6a.)	\$ <u>0.00</u>
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$ <u>0.00</u>
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$ <u>0.00</u>
9d. Student loans. (Copy line 6f.)	\$ <u>0.00</u>
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$ <u>0.00</u>
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$ <u>0.00</u>
9g. Total. Add lines 9a through 9f.	\$ <u>0.00</u>

Fill in this information to identify your case and this filing:

Debtor 1

Abraham Dolamakian

First Name Middle Name Last Name

Debtor 2

Mariam Dolamakian

(Spouse, if filing)

First Name Middle Name Last Name

United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF CALIFORNIA**

Case number **16-04156**

Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

No. Go to Part 2.

Yes. Where is the property?

1.1

11057 Paseo Castanada

Street address, if available, or other description

La Mesa CA 91941-0000

City State ZIP Code

San Diego

County

What is the property? Check all that apply

- Single-family home
- Duplex or multi-unit building
- Condominium or cooperative
- Manufactured or mobile home
- Land
- Investment property
- Timeshare
- Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

\$552,417.00

Current value of the portion you own?

\$552,417.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Fee simple

Check if this is community property
(see instructions)

Who has an interest in the property? Check one

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number:

**Square Feet: 1635 Sq. Ft.
FMV = Zillow.com**

If you own or have more than one, list here:

1.2 **Greenwood Memorial
4300 Imperial Ave**
 Street address, if available, or other description

San Diego CA 92102-0000
 City State ZIP Code

What is the property? Check all that apply

- Single-family home
- Duplex or multi-unit building
- Condominium or cooperative
- Manufactured or mobile home
- Land
- Investment property
- Timeshare
- Other **Burial Plot**

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property?	Current value of the portion you own?
\$15,866.00	\$15,866.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Check if this is community property
 (see instructions)

San Diego

County

Who has an interest in the property? Check one

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number:

**Hawthorne Place Lot 14 - Space 11 & 12
Burial Plot**

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

\$568,283.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

No

Yes

3.1 Make: **Toyota**
 Model: **Avalon**
 Year: **2006**
 Approximate mileage: **185000**
 Other information:
**Condition: Good
FMV = KBB**

Who has an interest in the property? Check one

- Debtor 1 only
 - Debtor 2 only
 - Debtor 1 and Debtor 2 only
 - At least one of the debtors and another
- Check if this is community property**
 (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property?	Current value of the portion you own?
\$6,604.00	\$6,604.00

3.2 Make: **Smart**
 Model: **ForTwo Passion**
 Year: **2009**
 Approximate mileage: **55924**
 Other information:
**Debtor is Legal Owner, all payments made by Debtor's brother who is the equitable owner
FMV = KBB**

Who has an interest in the property? Check one

- Debtor 1 only
 - Debtor 2 only
 - Debtor 1 and Debtor 2 only
 - At least one of the debtors and another
- Check if this is community property**
 (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property?	Current value of the portion you own?
\$6,662.00	\$0.00

4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

- No
 Yes

5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here.....=>

\$6,604.00

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

**Current value of the portion you own?
Do not deduct secured claims or exemptions.**

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

- No
 Yes. Describe.....

Miscellaneous Goods & Furnishings
Bedroom, living room, dining room furniture, kitchen appliances, washer/dryer, 3 televisions, and other miscellaneous household furnishing

\$4,500.00

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

- No
 Yes. Describe.....

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

- No
 Yes. Describe.....

9. Equipment for sports and hobbies

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

- No
 Yes. Describe.....

10. Firearms

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

- No
 Yes. Describe.....

11. Clothes

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

- No
 Yes. Describe.....

Personal Clothing

\$750.00

12. Jewelry

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

- No
 Yes. Describe.....

13. Non-farm animals

Examples: Dogs, cats, birds, horses

No

Yes. Describe.....

14. Any other personal and household items you did not already list, including any health aids you did not list

No

Yes. Give specific information.....

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here

\$5,250.00

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?

Do not deduct secured claims or exemptions.

16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

No

Yes.....

17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

No

Yes.....

Institution name:

17.1. Checking	Wells Fargo Checking Acct. XXXX-0721	\$1,364.09
17.2. Checking	Wells Fargo Checking Acct. XXXX-2393	\$95.29
17.3. Checking and Savings	JP Morgan Chase Checking Acct. XXXX-0641 - \$675 Savings Acct. XXXX-4839 - \$345	\$1,020.00

18. Bonds, mutual funds, or publicly traded stocks

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

No

Yes.....

Institution or issuer name:

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture

No

Yes. Give specific information about them.....

Name of entity:

% of ownership:

NUEVO MUNDO RESTAURANT GOUP, LLC **48** % **\$184,800.00**

20. Government and corporate bonds and other negotiable and non-negotiable instruments

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.

Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

No

Yes. Give specific information about them

Issuer name:

21. Retirement or pension accounts

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

No

Yes. List each account separately.

Type of account:

Institution name:

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

No

Yes.

Institution name or individual:

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

No

Yes..... Issuer name and description.

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

No

Yes.....

Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

No

Yes. Give specific information about them...

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

No

Yes. Give specific information about them...

27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

No

Yes. Give specific information about them...

Money or property owed to you?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

28. Tax refunds owed to you

No

Yes. Give specific information about them, including whether you already filed the returns and the tax years.....

29. Family support

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

No

Yes. Give specific information.....

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

No

Yes. Give specific information..

31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

No

Yes. Name the insurance company of each policy and list its value.

Company name:

Beneficiary:

Surrender or refund value:

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

- No
 Yes. Give specific information..

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment

Examples: Accidents, employment disputes, insurance claims, or rights to sue

- No
 Yes. Describe each claim.....

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

- No
 Yes. Describe each claim.....

35. Any financial assets you did not already list

- No
 Yes. Give specific information..

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....

\$187,279.38

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

37. Do you own or have any legal or equitable interest in any business-related property?

- No. Go to Part 6.
 Yes. Go to line 38.

Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.
If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

- No. Go to Part 7.
 Yes. Go to line 47.

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

- No
 Yes. Give specific information.....

54. Add the dollar value of all of your entries from Part 7. Write that number here

\$0.00

Debtor 1 **Abraham Dolamakian**
Debtor 2 **Mariam Dolamakian**

Case number (if known) **16-04156**

Part 8: List the Totals of Each Part of this Form	
55. Part 1: Total real estate, line 2	\$568,283.00
56. Part 2: Total vehicles, line 5	\$6,604.00
57. Part 3: Total personal and household items, line 15	\$5,250.00
58. Part 4: Total financial assets, line 36	\$187,279.38
59. Part 5: Total business-related property, line 45	\$0.00
60. Part 6: Total farm- and fishing-related property, line 52	\$0.00
61. Part 7: Total other property not listed, line 54	\$0.00
62. Total personal property. Add lines 56 through 61...	\$199,133.38
	Copy personal property total
63. Total of all property on Schedule A/B. Add line 55 + line 62	\$767,416.38

Fill in this information to identify your case:

Debtor 1	Abraham Dolamakian		
	First Name	Middle Name	Last Name
Debtor 2	Mariam Dolamakian		
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	SOUTHERN DISTRICT OF CALIFORNIA		
Case number (if known)	16-04156		

Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own Copy the value from <i>Schedule A/B</i>	Amount of the exemption you claim <i>Check only one box for each exemption.</i>	Specific laws that allow exemption
2006 Toyota Avalon 185000 miles Condition: Good FMV = KBB Line from <i>Schedule A/B</i>: 3.1	\$6,604.00	<input checked="" type="checkbox"/> \$5,350.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	C.C.P. § 703.140(b)(2)
Miscellaneous Goods & Furnishings Bedroom, living room, dining room furniture, kitchen appliances, washer/dryer, 3 televisions, and other miscellaneous household furnishings Line from <i>Schedule A/B</i>: 6.1	\$4,500.00	<input checked="" type="checkbox"/> \$4,500.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	C.C.P. § 703.140(b)(3)
Personal Clothing Line from <i>Schedule A/B</i>: 11.1	\$750.00	<input checked="" type="checkbox"/> \$750.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	C.C.P. § 703.140(b)(3)
NUEVO MUNDO RESTAURANT GOUP, LLC 48 % ownership Line from <i>Schedule A/B</i>: 19.1	\$184,800.00	<input checked="" type="checkbox"/> \$28,225.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	C.C.P. § 703.140(b)(5)

Debtor 1 **Abraham Dolamakian**
Debtor 2 **Mariam Dolamakian**

Case number (if known)

16-04156

3. Are you claiming a homestead exemption of more than \$160,375?

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

No

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

No

Yes

Fill in this information to identify your case:

Debtor 1	Abraham Dolamakian		
	First Name	Middle Name	Last Name
Debtor 2	Mariam Dolamakian		
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	SOUTHERN DISTRICT OF CALIFORNIA		
Case number (if known)	16-04156		

Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.

Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Column A	Column B	Column C
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
\$2,993.00	\$6,662.00	\$0.00

2.1 California Republic Bk Creditor's Name	Describe the property that secures the claim: 2009 Smart ForTwo Passion 55924 miles Debtor is Legal Owner, all payments made by Debtor's brother who is the equitable owner FMV = KBB	As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____
---	---	---	--

Who owes the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim relates to a community debt

Opened
11/13 Last
Active
6/21/16

Date debt was incurred Last 4 digits of account number 1001

2.2 Chase Mtg Creditor's Name	Describe the property that secures the claim: 11057 Paseo Castanada La Mesa, CA 91941 San Diego County Square Feet: 1635 Sq. Ft. FMV = Zillow.com	\$496,976.00	\$552,417.00	\$0.00
Po Box 24696 Columbus, OH 43224 Number, Street, City, State & Zip Code	As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Nature of lien. Check all that apply.		

Who owes the debt? Check one.

Debtor 1 Abraham Dolamakian First Name _____ Middle Name _____ Last Name _____	Case number (if known) 16-04156																				
Debtor 2 Mariam Dolamakian First Name _____ Middle Name _____ Last Name _____																					
<p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan)</p> <p><input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Judgment lien from a lawsuit</p> <p><input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Other (including a right to offset) _____</p> <p><input checked="" type="checkbox"/> Check if this claim relates to a community debt</p>																					
<p style="text-align: center;">Opened 09/06 Last Active 5/16/16</p> <p>Date debt was incurred 5/16/16 Last 4 digits of account number 1321</p>																					
<table border="1"> <tr> <td style="width: 30%;">2.3 Franklin Credit Mngmt Corp Creditor's Name</td> <td style="width: 40%;">Describe the property that secures the claim: 11057 Paseo Castanada La Mesa, CA 91941 San Diego County Square Feet: 1635 Sq. Ft. FMV = Zillow.com</td> <td style="width: 15%;">\$90,729.30</td> <td style="width: 15%;">\$552,417.00</td> <td style="width: 15%;">\$35,288.30</td> </tr> <tr> <td colspan="5"> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p> </td> </tr> <tr> <td colspan="5"> <p>Nature of lien. Check all that apply.</p> <p><input type="checkbox"/> An agreement you made (such as mortgage or secured car loan)</p> <p><input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)</p> <p><input type="checkbox"/> Judgment lien from a lawsuit</p> <p><input type="checkbox"/> Other (including a right to offset) _____</p> </td> </tr> <tr> <td colspan="2">Date debt was incurred 2007</td> <td colspan="3">Last 4 digits of account number 7306</td> </tr> </table>		2.3 Franklin Credit Mngmt Corp Creditor's Name	Describe the property that secures the claim: 11057 Paseo Castanada La Mesa, CA 91941 San Diego County Square Feet: 1635 Sq. Ft. FMV = Zillow.com	\$90,729.30	\$552,417.00	\$35,288.30	<p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p>					<p>Nature of lien. Check all that apply.</p> <p><input type="checkbox"/> An agreement you made (such as mortgage or secured car loan)</p> <p><input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)</p> <p><input type="checkbox"/> Judgment lien from a lawsuit</p> <p><input type="checkbox"/> Other (including a right to offset) _____</p>					Date debt was incurred 2007		Last 4 digits of account number 7306		
2.3 Franklin Credit Mngmt Corp Creditor's Name	Describe the property that secures the claim: 11057 Paseo Castanada La Mesa, CA 91941 San Diego County Square Feet: 1635 Sq. Ft. FMV = Zillow.com	\$90,729.30	\$552,417.00	\$35,288.30																	
<p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p>																					
<p>Nature of lien. Check all that apply.</p> <p><input type="checkbox"/> An agreement you made (such as mortgage or secured car loan)</p> <p><input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)</p> <p><input type="checkbox"/> Judgment lien from a lawsuit</p> <p><input type="checkbox"/> Other (including a right to offset) _____</p>																					
Date debt was incurred 2007		Last 4 digits of account number 7306																			
<table border="1"> <tr> <td style="width: 30%;">2.4 Greenwood Memorial Park Creditor's Name</td> <td style="width: 40%;">Describe the property that secures the claim: Greenwood Memorial 4300 Imperial Ave San Diego, CA 92102 San Diego County Hawthorne Place Lot 14 - Space 11 & 12 Burial Plot</td> <td style="width: 15%;">\$7,463.00</td> <td style="width: 15%;">\$15,866.00</td> <td style="width: 15%;">\$0.00</td> </tr> <tr> <td colspan="5"> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> </td> </tr> <tr> <td colspan="5"> <p>Nature of lien. Check all that apply.</p> <p><input type="checkbox"/> An agreement you made (such as mortgage or secured car loan)</p> <p><input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)</p> <p><input type="checkbox"/> Judgment lien from a lawsuit</p> <p><input type="checkbox"/> Other (including a right to offset) _____</p> </td> </tr> <tr> <td colspan="2">Date debt was incurred 5/2012</td> <td colspan="3">Last 4 digits of account number _____</td> </tr> </table>		2.4 Greenwood Memorial Park Creditor's Name	Describe the property that secures the claim: Greenwood Memorial 4300 Imperial Ave San Diego, CA 92102 San Diego County Hawthorne Place Lot 14 - Space 11 & 12 Burial Plot	\$7,463.00	\$15,866.00	\$0.00	<p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p>					<p>Nature of lien. Check all that apply.</p> <p><input type="checkbox"/> An agreement you made (such as mortgage or secured car loan)</p> <p><input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)</p> <p><input type="checkbox"/> Judgment lien from a lawsuit</p> <p><input type="checkbox"/> Other (including a right to offset) _____</p>					Date debt was incurred 5/2012		Last 4 digits of account number _____		
2.4 Greenwood Memorial Park Creditor's Name	Describe the property that secures the claim: Greenwood Memorial 4300 Imperial Ave San Diego, CA 92102 San Diego County Hawthorne Place Lot 14 - Space 11 & 12 Burial Plot	\$7,463.00	\$15,866.00	\$0.00																	
<p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p>																					
<p>Nature of lien. Check all that apply.</p> <p><input type="checkbox"/> An agreement you made (such as mortgage or secured car loan)</p> <p><input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)</p> <p><input type="checkbox"/> Judgment lien from a lawsuit</p> <p><input type="checkbox"/> Other (including a right to offset) _____</p>																					
Date debt was incurred 5/2012		Last 4 digits of account number _____																			

Debtor 1 **Abraham Dolamakian**
First Name _____ Middle Name _____ Last Name _____
Case number (if known) **16-04156**

Debtor 2 **Mariam Dolamakian**
First Name _____ Middle Name _____ Last Name _____

Add the dollar value of your entries in Column A on this page. Write that number here:
If this is the last page of your form, add the dollar value totals from all pages.
Write that number here:

\$598,161.30
\$598,161.30

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

- Name, Number, Street, City, State & Zip Code
Bsi Financial Services
314 S Franklin Street
Titusville, PA 16354 On which line in Part 1 did you enter the creditor? 2.3
- Name, Number, Street, City, State & Zip Code
The Wolf Firm
2955 Main St., 2nd Flr.
Irvine, CA 92614 Last 4 digits of account number 1018
- Name, Number, Street, City, State & Zip Code
The Wolf Firm
2955 Main St., 2nd Flr.
Irvine, CA 92614 On which line in Part 1 did you enter the creditor? 2.3
- Name, Number, Street, City, State & Zip Code
The Wolf Firm
2955 Main St., 2nd Flr.
Irvine, CA 92614 Last 4 digits of account number 2611

Fill in this information to identify your case:

Debtor 1	Abraham Dolamakian		
	First Name	Middle Name	Last Name
Debtor 2	Mariam Dolamakian		
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	SOUTHERN DISTRICT OF CALIFORNIA		
Case number (if known)	16-04156		

Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

- No. Go to Part 2.
 Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

	Total claim	Priority amount	Nonpriority amount
2.1	\$0.00	\$0.00	\$0.00
Priority Creditor's Name PIT Bankruptcy P.O. Box 2952 Sacramento, CA 95812	Last 4 digits of account number		
Number Street City State Zip Code	When was the debt incurred?		
Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
<input type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Contingent		
<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Unliquidated		
<input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Disputed		
<input type="checkbox"/> At least one of the debtors and another	Type of PRIORITY unsecured claim:		
<input type="checkbox"/> Check if this claim is for a community debt	<input type="checkbox"/> Domestic support obligations		
Is the claim subject to offset?	<input checked="" type="checkbox"/> Taxes and certain other debts you owe the government		
<input checked="" type="checkbox"/> No	<input type="checkbox"/> Claims for death or personal injury while you were intoxicated		
<input type="checkbox"/> Yes	<input type="checkbox"/> Other. Specify _____		

Debtor 1 **Abraham Dolamakian**
Debtor 2 **Mariam Dolamakian**

Case number (if known)

16-04156

2.2	Internal Revenue Service Priority Creditor's Name Central Insolvency Operations PO Box 21126 Philadelphia, PA 19114 Number Street City State Zip Code	Last 4 digits of account number	\$0.00	\$0.00	\$0.00
	Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another	When was the debt incurred?			
	Check if this claim is for a community debt	As of the date you file, the claim is: Check all that apply			
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify _____		

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

- No. You have nothing to report in this part. Submit this form to the court with your other schedules.
 Yes.

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

		Total claim	
4.1	Ally Financial Nonpriority Creditor's Name Po Box 380901 Bloomington, MN 55438 Number Street City State Zip Code	Last 4 digits of account number 4081 When was the debt incurred? Opened 03/06 Last Active 8/19/11	\$0.00
	Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another	As of the date you file, the claim is: Check all that apply	
	Check if this claim is for a community debt	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Automobile	

Debtor 1 **Abraham Dolamakian**
Debtor 2 **Mariam Dolamakian**

Case number (if known)

16-04156

4.2	Bmw Financial Services Nonpriority Creditor's Name Attn: Bankruptcy Department Po Box 3608 Dublin, OH 43016 Number Street City State Zip Code	Last 4 digits of account number 8781	\$0.00
		When was the debt incurred? Opened 07/05 Last Active 7/30/08	
	As of the date you file, the claim is: Check all that apply		
	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Lease		
4.3	Bombay/Prism/Citibank Nonpriority Creditor's Name Po Box 20507 Attn: Centralized Bankruptcy Kansas City, MO 64195 Number Street City State Zip Code	Last 4 digits of account number 6728	\$0.00
		When was the debt incurred? Opened 2/16/07 Last Active 7/29/07	
	As of the date you file, the claim is: Check all that apply		
	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Charge Account		
4.4	Capital One Nonpriority Creditor's Name Po Box 30285 Salt Lake City, UT 84130 Number Street City State Zip Code	Last 4 digits of account number 7907	\$37.00
		When was the debt incurred? Opened 10/02 Last Active 2/19/16	
	As of the date you file, the claim is: Check all that apply		
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card		

Debtor 1 **Abraham Dolamakian**
Debtor 2 **Mariam Dolamakian**

Case number (if known)

16-04156

4.5	Chase Nonpriority Creditor's Name Attn: Correspondence Dept Po Box 15298 Wilmington, DE 19850 Number Street City State Zip Code	Last 4 digits of account number 4319	\$0.00
		When was the debt incurred? Opened 01/08 Last Active 10/06/08	
	As of the date you file, the claim is: Check all that apply		
	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Student loans Is the claim subject to offset? <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input checked="" type="checkbox"/> No <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Yes <input checked="" type="checkbox"/> Other. Specify Credit Card		
4.6	Chase Nonpriority Creditor's Name Attn: Correspondence Dept Po Box 15298 Wilmington, DE 19850 Number Street City State Zip Code	Last 4 digits of account number 0129	\$0.00
		When was the debt incurred? Opened 08/07 Last Active 01/09	
	As of the date you file, the claim is: Check all that apply		
	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Student loans Is the claim subject to offset? <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input checked="" type="checkbox"/> No <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Yes <input checked="" type="checkbox"/> Other. Specify Credit Card		
4.7	Chase Nonpriority Creditor's Name Attn: Correspondence Dept Po Box 15298 Wilmington, DE 19850 Number Street City State Zip Code	Last 4 digits of account number 9658	\$0.00
		When was the debt incurred? Opened 06/03 Last Active 6/30/05	
	As of the date you file, the claim is: Check all that apply		
	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Student loans Is the claim subject to offset? <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input checked="" type="checkbox"/> No <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Yes <input checked="" type="checkbox"/> Other. Specify Credit Card		

Debtor 1 **Abraham Dolamakian**
Debtor 2 **Mariam Dolamakian**

Case number (if known)

16-04156

4.8	Chase Bank Nonpriority Creditor's Name 3415 Vision Dr. Columbus, OH 43218 Number Street City State Zip Code	Last 4 digits of account number 9740	\$0.00
	When was the debt incurred? Opened 03/06 Last Active 9/06/06		
	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	<input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Check if this claim is for a community debt	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	<input checked="" type="checkbox"/> Other. Specify Credit Line Secured	
4.9	Downey S & L Nonpriority Creditor's Name Pob 6060 Newport Beach, CA 92658 Number Street City State Zip Code	Last 4 digits of account number 9766	\$0.00
	When was the debt incurred? Opened 6/24/03 Last Active 9/05/06		
	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Check if this claim is for a community debt	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	<input checked="" type="checkbox"/> Other. Specify Real Estate Specific	
4.1 0	DSRM National Bnk Nonpriority Creditor's Name Po Box 631 Amarillo, TX 79105 Number Street City State Zip Code	Last 4 digits of account number 0000	\$0.00
	When was the debt incurred? Opened 11/28/00		
	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	<input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Check if this claim is for a community debt	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	<input checked="" type="checkbox"/> Other. Specify Charge Account	

Debtor 1 **Abraham Dolamakian**
Debtor 2 **Mariam Dolamakian**

Case number (if known)

16-04156

<p>4.1 1</p> <p>Kohls/Capital One Nonpriority Creditor's Name</p> <p>Po Box 3120 Milwaukee, WI 53201 Number Street City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input checked="" type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number 7667</p> <p>When was the debt incurred? Opened 04/04 Last Active 10/16/10</p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify Charge Account</p>	<p>\$0.00</p>
<p>4.1 2</p> <p>Mabt - Genesis Retail Nonpriority Creditor's Name</p> <p>Bankcard Services Po Box 4477 Beaverton, OR 97076 Number Street City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number 1460</p> <p>When was the debt incurred? Opened 8/19/13 Last Active 4/14/14</p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify Credit Card</p>	<p>\$0.00</p>
<p>4.1 3</p> <p>Progressive Management Systems Nonpriority Creditor's Name</p> <p>1521 W Cameron Ave 1st Floor West Covina, CA 91790 Number Street City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input checked="" type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number 7897</p> <p>When was the debt incurred? Opened 07/14</p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify Collection Attorney Grossmont Hospital Corporation</p>	<p>\$2,167.00</p>

4.1 4	<p>Progressive Management Systems Nonpriority Creditor's Name 1521 W Cameron Ave 1st Floor West Covina, CA 91790 Number Street City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number 7337</p> <p>When was the debt incurred? Opened 11/15</p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify Collection Attorney Grossmont Hospital Corporation</p>	\$769.00
4.1 5	<p>Santander Consumer USA Nonpriority Creditor's Name Po Box 961245 Fort Worth, TX 76161 Number Street City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number 1000</p> <p>When was the debt incurred? Opened 07/07 Last Active 10/14/14</p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify Automobile</p>	\$0.00
4.1 6	<p>Synchrony Bank/Walmart Nonpriority Creditor's Name Po Box 965064 Orlando, FL 32896 Number Street City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number 7045</p> <p>When was the debt incurred? Opened 12/98 Last Active 9/30/04</p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify Charge Account</p>	\$0.00

Debtor 1 **Abraham Dolamakian**
Debtor 2 **Mariam Dolamakian**

Case number (if known)

16-04156

<p>4.1 7</p> <p>Synchrony Bank/Walmart Nonpriority Creditor's Name</p> <p>Po Box 965064 Orlando, FL 32896</p> <p>Number Street City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number</p> <p>2256</p> <p>When was the debt incurred?</p> <p>Opened 2/08/07 Last Active 1/09/11</p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify Credit Card</p>	<p>\$0.00</p>
<p>4.1 8</p> <p>Toyota Motor Credit Co Nonpriority Creditor's Name</p> <p>Toyota Financial Services Po Box 8026 Cedar Rapids, IA 52408</p> <p>Number Street City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number</p> <p>0001</p> <p>When was the debt incurred?</p> <p>Opened 10/06 Last Active 10/15/10</p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify Automobile</p>	<p>\$0.00</p>
<p>4.1 9</p> <p>Visa Dept Store National Bank Nonpriority Creditor's Name</p> <p>Attn: Bankruptcy Po Box 8053 Mason, OH 45040</p> <p>Number Street City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input checked="" type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number</p> <p>5810</p> <p>When was the debt incurred?</p> <p>Opened 09/85 Last Active 6/06/16</p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify Charge Account</p>	<p>\$1,844.00</p>

Debtor 1 **Abraham Dolamakian**
Debtor 2 **Mariam Dolamakian**

Case number (if known)

16-04156

4.2 0	Visa Dept Store National Bank Nonpriority Creditor's Name Attn: Bankruptcy Po Box 8053 Mason, OH 45040 Number Street City State Zip Code	Last 4 digits of account number 2434	\$0.00
		When was the debt incurred? Opened 01/16 Last Active 06/16	
		As of the date you file, the claim is: Check all that apply	
	<input type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Contingent	
	<input checked="" type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Disputed	
	<input type="checkbox"/> At least one of the debtors and another	<input type="checkbox"/> Type of NONPRIORITY unsecured claim:	
	<input type="checkbox"/> Check if this claim is for a community debt	<input type="checkbox"/> Student loans	
	<input type="checkbox"/> Is the claim subject to offset?	<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts	
	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> Other. Specify Charge Account	

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

Total claims from Part 1	6a. Domestic support obligations	Total Claim	
		6a.	\$ 0.00
	6b. Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e. Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
Total claims from Part 2	6f. Student loans	Total Claim	
		6f.	\$ 0.00
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 4,817.00
	6j. Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 4,817.00

Fill in this information to identify your case:

Debtor 1	Abraham Dolamakian		
	First Name	Middle Name	Last Name
Debtor 2	Mariam Dolamakian		
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	SOUTHERN DISTRICT OF CALIFORNIA		
Case number (if known)	16-04156		

Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

- No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B:Property* (Official Form 106 A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease			State what the contract or lease is for
Name, Number, Street, City, State and ZIP Code			
2.1	Name		
	Number	Street	
	City	State	ZIP Code
2.2	Name		
	Number	Street	
	City	State	ZIP Code
2.3	Name		
	Number	Street	
	City	State	ZIP Code
2.4	Name		
	Number	Street	
	City	State	ZIP Code
2.5	Name		
	Number	Street	
	City	State	ZIP Code

Fill in this information to identify your case:

Debtor 1	Abraham Dolamakian		
	First Name	Middle Name	Last Name
Debtor 2	Mariam Dolamakian		
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	SOUTHERN DISTRICT OF CALIFORNIA		
Case number (if known)	16-04156		

Check if this is an amended filing

Official Form 106H Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)

- No
 Yes

2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

- No. Go to line 3.
 Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

 No
 Yes.

In which community state or territory did you live? -NONE-. Fill in the name and current address of that person.

Name of your spouse, former spouse, or legal equivalent
Number, Street, City, State & Zip Code

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor
Name, Number, Street, City, State and ZIP Code

Column 2: The creditor to whom you owe the debt
Check all schedules that apply:

3.1

Name _____

Schedule D, line _____

Schedule E/F, line _____

Schedule G, line _____

Number _____ Street _____
City _____ State _____ ZIP Code _____

3.2

Name _____

Schedule D, line _____

Schedule E/F, line _____

Schedule G, line _____

Number _____ Street _____
City _____ State _____ ZIP Code _____

Fill in this information to identify your case:

Debtor 1	Abraham Dolamakian
Debtor 2 (Spouse, if filing)	Mariam Dolamakian
United States Bankruptcy Court for the:	SOUTHERN DISTRICT OF CALIFORNIA
Case number (If known)	16-04156

Check if this is:

- An amended filing
 A supplement showing postpetition chapter 13 income as of the following date:
MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employment status

	Debtor 1	Debtor 2 or non-filing spouse
<input type="checkbox"/> Employed	<input type="checkbox"/> Employed	
<input checked="" type="checkbox"/> Not employed	<input checked="" type="checkbox"/> Not employed	
Occupation	_____	_____
Employer's name	_____	_____
Employer's address	_____	_____

How long employed there? _____

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1 **For Debtor 2 or non-filing spouse**

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.
3. Estimate and list monthly overtime pay.
4. Calculate gross Income. Add line 2 + line 3.

2. \$ 0.00	\$ 0.00
3. +\$ 0.00	+\$ 0.00
4. \$ 0.00	\$ 0.00

	For Debtor 1	For Debtor 2 or non-filing spouse
4.	\$ 0.00	\$ 0.00

Copy line 4 here		
5. List all payroll deductions:		
5a. Tax, Medicare, and Social Security deductions	5a. \$ 0.00	\$ 0.00
5b. Mandatory contributions for retirement plans	5b. \$ 0.00	\$ 0.00
5c. Voluntary contributions for retirement plans	5c. \$ 0.00	\$ 0.00
5d. Required repayments of retirement fund loans	5d. \$ 0.00	\$ 0.00
5e. Insurance	5e. \$ 0.00	\$ 0.00
5f. Domestic support obligations	5f. \$ 0.00	\$ 0.00
5g. Union dues	5g. \$ 0.00	\$ 0.00
5h. Other deductions. Specify: _____	5h.+ \$ 0.00	+ \$ 0.00
6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6. \$ 0.00	\$ 0.00
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7. \$ 0.00	\$ 0.00

8. List all other income regularly received:		
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$ 1,600.00	\$ 1,600.00
8b. Interest and dividends	8b. \$ 0.00	\$ 0.00
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$ 0.00	\$ 0.00
8d. Unemployment compensation	8d. \$ 0.00	\$ 0.00
8e. Social Security	8e. \$ 247.00	\$ 615.00
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	8f. \$ 0.00	\$ 0.00
8g. Pension or retirement income	8g. \$ 0.00	\$ 0.00
8h. Other monthly income. Specify: _____	8h.+ \$ 0.00	+ \$ 0.00

9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9. \$ 1,847.00	\$ 2,215.00
---	-----------------------	--------------------

10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$ 1,847.00	+ \$ 2,215.00	= \$ 4,062.00
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11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: _____	11. +\$ 0.00
---	---------------------

12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies	12. \$ 4,062.00
---	------------------------

Combined monthly income

13. Do you expect an increase or decrease within the year after you file this form?	
<input checked="" type="checkbox"/> No.	
<input type="checkbox"/> Yes. Explain: 2009 Smart is financed by Debtor, but is paid for by Debtor's brother. Vehicle payments are made directly to lender by brother. Vehicle lender claim is not contemplated to be paid in the plan.	

Fill in this information to identify your case:

Debtor 1	Abraham Dolamakian
Debtor 2	Mariam Dolamakian
(Spouse, if filing)	
United States Bankruptcy Court for the:	<u>SOUTHERN DISTRICT OF CALIFORNIA</u>
Case number (If known)	<u>16-04156</u>

Check if this is:

- An amended filing
 A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

- No. Go to line 2.
 Yes. Does Debtor 2 live in a separate household?

No

Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.

2. Do you have dependents? No

Do not list Debtor 1 and
Debtor 2.

Yes. Fill out this information for
each dependent.....

Dependent's relationship to
Debtor 1 or Debtor 2

Dependent's
age

Does dependent
live with you?

Do not state the
dependents names.

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

- No
 Yes
 No
 Yes
 No
 Yes
 No
 Yes

3. Do your expenses include expenses of people other than yourself and your dependents? No Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know
the value of such assistance and have included it on Schedule I: Your Income
(Official Form 106I.)

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$ 1,627.00

Your expenses

If not included in line 4:

- 4a. Real estate taxes
4b. Property, homeowner's, or renter's insurance
4c. Home maintenance, repair, and upkeep expenses
4d. Homeowner's association or condominium dues
5. Additional mortgage payments for your residence, such as home equity loans

4a. \$ <u>0.00</u>
4b. \$ <u>0.00</u>
4c. \$ <u>0.00</u>
4d. \$ <u>0.00</u>
5. \$ <u>275.00</u>

6. Utilities:

6a. Electricity, heat, natural gas	6a. \$ <u>190.00</u>
6b. Water, sewer, garbage collection	6b. \$ <u>169.00</u>
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$ <u>200.00</u>
6d. Other. Specify: _____	6d. \$ <u>0.00</u>

7. Food and housekeeping supplies

8. Childcare and children's education costs	8. \$ <u>0.00</u>
---	-------------------

9. Clothing, laundry, and dry cleaning

10. Personal care products and services

11. Medical and dental expenses

12. Transportation. Include gas, maintenance, bus or train fare.

Do not include car payments.

12. \$ <u>100.00</u>

13. Entertainment, clubs, recreation, newspapers, magazines, and books

14. Charitable contributions and religious donations

15. Insurance.

Do not include insurance deducted from your pay or included in lines 4 or 20.

15a. Life insurance	15a. \$ <u>0.00</u>
15b. Health insurance	15b. \$ <u>0.00</u>
15c. Vehicle insurance	15c. \$ <u>45.00</u>
15d. Other insurance. Specify: _____	15d. \$ <u>0.00</u>

16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.

Specify: _____

16. \$ <u>0.00</u>

17. Installment or lease payments:

17a. Car payments for Vehicle 1	17a. \$ <u>0.00</u>
17b. Car payments for Vehicle 2	17b. \$ <u>0.00</u>
17c. Other. Specify: _____	17c. \$ <u>0.00</u>
17d. Other. Specify: _____	17d. \$ <u>0.00</u>

18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).

19. Other payments you make to support others who do not live with you.

Specify: _____

19. \$ <u>0.00</u>

20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.

20a. Mortgages on other property	20a. \$ <u>0.00</u>
20b. Real estate taxes	20b. \$ <u>0.00</u>
20c. Property, homeowner's, or renter's insurance	20c. \$ <u>0.00</u>
20d. Maintenance, repair, and upkeep expenses	20d. \$ <u>0.00</u>
20e. Homeowner's association or condominium dues	20e. \$ <u>0.00</u>

21. Other: Specify: **Funeral Plot**

21. +\$ <u>168.00</u>

22. Calculate your monthly expenses

22a. Add lines 4 through 21.	\$ <u>3,439.00</u>
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	\$ <u>3,439.00</u>
22c. Add line 22a and 22b. The result is your monthly expenses.	\$ <u>3,439.00</u>

23. Calculate your monthly net income.

23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$ <u>4,062.00</u>
23b. Copy your monthly expenses from line 22c above.	23b. -\$ <u>3,439.00</u>
23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c. \$ <u>623.00</u>

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

No.

Yes.

Explain here: _____

Fill in this information to identify your case:

Debtor 1	Abraham Dolamakian		
	First Name	Middle Name	Last Name
Debtor 2	Mariam Dolamakian		
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	SOUTHERN DISTRICT OF CALIFORNIA		
Case number (if known)	16-04156		

Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

 Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

No

Yes. Name of person _____

Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119)

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ Abraham Dolamakian

Abraham Dolamakian

Signature of Debtor 1

Date July 20, 2016

X /s/ Mariam Dolamakian

Mariam Dolamakian

Signature of Debtor 2

Date July 20, 2016

Fill in this information to identify your case:

Debtor 1	Abraham Dolamakian		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	Mariam Dolamakian		
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	SOUTHERN DISTRICT OF CALIFORNIA		
Case number (if known)	<u>16-04156</u>		

Check if this is an amended filing

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Give Details About Your Marital Status and Where You Lived Before

1. What is your current marital status?

- Married
 Not married

2. During the last 3 years, have you lived anywhere other than where you live now?

- No
 Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1 Prior Address:

Dates Debtor 1
lived there

Debtor 2 Prior Address:

Dates Debtor 2
lived there

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.)

- No
 Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

Part 2 Explain the Sources of Your Income

4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.
If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

- No
 Yes. Fill in the details.

Debtor 1	Gross income (before deductions and exclusions)	Debtor 2	Gross income (before deductions and exclusions)
Sources of income Check all that apply.		Sources of income Check all that apply.	

5. Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

- No
 Yes. Fill in the details.

	Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of income Describe below.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	Interest / Dividends	\$10,095.01	Interest / Dividends	\$10,095.01
	SSI Benefits	\$2,231.40	SSI Benefits	\$4,324.80
For last calendar year: (January 1 to December 31, 2015)	SSI Benefits	\$4,462.80	SSI Benefits	\$8,649.60
For the calendar year before that: (January 1 to December 31, 2014)	SSI Benefits	\$4,462.80	SSI Benefits	\$8,649.60

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?

- No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?

- No. Go to line 7.
 Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

- Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

- No. Go to line 7.
 Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for ...
Chase Mtg Po Box 24696 Columbus, OH 43224	May 2016 - July 2016	\$4,881.00	\$496,976.00	<input checked="" type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit Card <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other _____

Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for ...
California Republic Bk 1400 Newport Center Drive Newport Beach, CA 92660	May 2016 - July 2016	\$426.00	\$2,993.00	<input type="checkbox"/> Mortgage <input checked="" type="checkbox"/> Car <input type="checkbox"/> Credit Card <input type="checkbox"/> Loan Repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other _____

7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

- No
 Yes. List all payments to an insider.

Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
----------------------------	------------------	-------------------	----------------------	-------------------------

8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?

Include payments on debts guaranteed or cosigned by an insider.

- No
 Yes. List all payments to an insider

Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
----------------------------	------------------	-------------------	----------------------	-------------------------

Part 4: Identify Legal Actions, Repossessions, and Foreclosures

9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

- No
 Yes. Fill in the details.

Case title Case number	Nature of the case	Court or agency	Status of the case
---------------------------	--------------------	-----------------	--------------------

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?
 Check all that apply and fill in the details below.

- No. Go to line 11.
 Yes. Fill in the information below.

Creditor Name and Address	Describe the Property	Date	Value of the property
---------------------------	-----------------------	------	-----------------------

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

- No
 Yes. Fill in the details.

Creditor Name and Address	Describe the action the creditor took	Date action was taken	Amount
---------------------------	---------------------------------------	-----------------------	--------

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

- No
 Yes

Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

No
 Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift and Address:			

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

No
 Yes. Fill in the details for each gift or contribution.

Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what you contributed	Dates you contributed	Value

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

No
 Yes. Fill in the details.

Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost

Part 7: List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

No
 Yes. Fill in the details.

Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
The Law Office of Marco A. Torres 550 West C. Street Suite 1600 San Diego, CA 92101 mat@mtorreslaw.com	Attorney Fees - \$2,137; Filing Fees - \$310; Credit Report \$53	June 28, 2016	\$2,500.00

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

No
 Yes. Fill in the details.

Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

No

Yes. Fill in the details.

Person Who Received Transfer Address	Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made
Person's relationship to you			

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)

No

Yes. Fill in the details.

Name of trust	Description and value of the property transferred	Date Transfer was made
---------------	---	---------------------------

Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

No

Yes. Fill in the details.

Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
---	------------------------------------	----------------------------------	---	---

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

No

Yes. Fill in the details.

Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
---	---	-----------------------	--------------------------

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

No

Yes. Fill in the details.

Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
--	---	-----------------------	--------------------------

Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

No

Yes. Fill in the details.

Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
--	---	-----------------------	-------

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- Environmental law** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- **Site** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- **Hazardous material** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

- No
- Yes. Fill in the details.

Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
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25. Have you notified any governmental unit of any release of hazardous material?

- No
- Yes. Fill in the details.

Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
--	---	-----------------------------------	----------------

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- No
- Yes. Fill in the details.

Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
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Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
- A member of a limited liability company (LLC) or limited liability partnership (LLP)
- A partner in a partnership
- An officer, director, or managing executive of a corporation
- An owner of at least 5% of the voting or equity securities of a corporation
- No. None of the above applies. Go to Part 12.
- Yes. Check all that apply above and fill in the details below for each business.

Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN. Dates business existed EIN: From-To 2005 - Present
Nuevo Mundo Restaurant Group, LLC 9335 Airway Road, Suite 112 San Diego, CA 92154	Caterina	

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

- No
 Yes. Fill in the details below.

Name
Address
(Number, Street, City, State and ZIP Code)

Date Issued

Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.
18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Abraham Dolamakian

Abraham Dolamakian
Signature of Debtor 1

/s/ Mariam Dolamakian

Mariam Dolamakian
Signature of Debtor 2

Date July 20, 2016

Date July 20, 2016

Did you attach additional pages to *Your Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

- No
 Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

- No
 Yes. Name of Person _____. Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Fill in this information to identify your case:

Debtor 1	Abraham Dolamakian
Debtor 2 (Spouse, if filing)	Mariam Dolamakian
United States Bankruptcy Court for the: <u>Southern District of California</u>	
Case number (if known)	16-04156

Check as directed in lines 17 and 21:

- According to the calculations required by this Statement:
- 1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).
 - 2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).
 - 3. The commitment period is 3 years.
 - 4. The commitment period is 5 years.

Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income

- What is your marital and filing status? Check one only.
 - Not married. Fill out Column A, lines 2-11.
 - Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

	Column A Debtor 1	Column B Debtor 2 or non-filing spouse
2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	\$ <u>0.00</u>	\$ <u>0.00</u>
3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.	\$ <u>0.00</u>	\$ <u>0.00</u>
4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.	\$ <u>0.00</u>	\$ <u>0.00</u>
5. Net income from operating a business, profession, or farm	Debtor 1	
Gross receipts (before all deductions)	\$ <u>0.00</u>	
Ordinary and necessary operating expenses	-\$ <u>0.00</u>	
Net monthly income from a business, profession, or farm	\$ <u>0.00</u>	Copy here -> \$ <u>0.00</u>
6. Net income from rental and other real property	Debtor 1	
Gross receipts (before all deductions)	\$ <u>0.00</u>	
Ordinary and necessary operating expenses	-\$ <u>0.00</u>	
Net monthly income from rental or other real property	\$ <u>0.00</u>	Copy here -> \$ <u>0.00</u>

7. Interest, dividends, and royalties

Column A
Debtor 1Column B
Debtor 2 or
non-filing spouse

\$ 1,682.51

\$ 1,682.51

8. Unemployment compensation

\$ 0.00

\$ 0.00

Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:

For you \$ 0.00
 For your spouse \$ 0.00

9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act.

\$ 0.00

\$ 0.00

10. Income from all other sources not listed above. Specify the source and amount.

Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below.

\$ 0.00

\$ 0.00

\$ 0.00

\$ 0.00

+ \$ 0.00

\$ 0.00

Total amounts from separate pages, if any.

11. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.

\$ 1,682.51

+ \$ 1,682.51

= \$ 3,365.02

Total average
monthly income

Part 2: Determine How to Measure Your Deductions from Income

12. Copy your total average monthly income from line 11. \$ 3,365.02

13. Calculate the marital adjustment. Check one:

- You are not married. Fill in 0 below.
 You are married and your spouse is filing with you. Fill in 0 below.
 You are married and your spouse is not filing with you.

Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents.

Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page.

If this adjustment does not apply, enter 0 below.

..... \$
 \$
 +\$
 Total \$ 0.00 Copy here=> - 0.00

14. Your current monthly income. Subtract line 13 from line 12. \$ 3,365.02

15. Calculate your current monthly income for the year. Follow these steps:

15a. Copy line 14 here=> \$ 3,365.02

Multiply line 15a by 12 (the number of months in a year).

x 12

15b. The result is your current monthly income for the year for this part of the form. \$ 40,380.24

16. Calculate the median family income that applies to you. Follow these steps:

16a. Fill in the state in which you live.

CA

16b. Fill in the number of people in your household.

2

16c. Fill in the median family income for your state and size of household.

\$ 66,537.00

To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

17. How do the lines compare?

- 17a. Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, *Disposable income is not determined under 11 U.S.C. § 1325(b)(3)*. **Go to Part 3.** Do NOT fill out *Calculation of Your Disposable Income* (Official Form 122C-2).
- 17b. Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, *Disposable income is determined under 11 U.S.C. § 1325(b)(3)*. **Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 122C-2).** On line 39 of that form, copy your current monthly income from line 14 above.

Part 3: Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4)

18. Copy your total average monthly income from line 11 . \$ 3,365.02

19. Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13.

19a. If the marital adjustment does not apply, fill in 0 on line 19a.

-\$ 0.00

19b. Subtract line 19a from line 18.

\$ 3,365.02

20. Calculate your current monthly income for the year. Follow these steps:

20a. Copy line 19b . \$ 3,365.02

Multiply by 12 (the number of months in a year).

x 12

20b. The result is your current monthly income for the year for this part of the form

\$ 40,380.24

20c. Copy the median family income for your state and size of household from line 16c

\$ 66,537.00

21. How do the lines compare?

- Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, *The commitment period is 3 years*. Go to Part 4.
- Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, *The commitment period is 5 years*. Go to Part 4.

Part 4: Sign Below

By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct.

X /s/ Abraham Dolamakian**Abraham Dolamakian**

Signature of Debtor 1

Date July 20, 2016

MM / DD / YYYY

If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

X /s/ Mariam Dolamakian**Mariam Dolamakian**

Signature of Debtor 2

Date July 20, 2016

MM / DD / YYYY

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 01/01/2016 to 06/30/2016.

Line 7 - Interest, dividends, and royalties

Source of Income: Nuevo Mundo Restaurant Group, LLC

Income by Month:

6 Months Ago:	01/2016	\$0.00
5 Months Ago:	02/2016	\$160.01
4 Months Ago:	03/2016	\$1,558.71
3 Months Ago:	04/2016	\$1,272.42
2 Months Ago:	05/2016	\$3,773.37
Last Month:	06/2016	\$3,330.56

Average per month: \$1,682.51

Non-CMI - Social Security Act Income

Source of Income: Social Security

Income by Month:

6 Months Ago:	01/2016	\$371.90
5 Months Ago:	02/2016	\$371.90
4 Months Ago:	03/2016	\$371.90
3 Months Ago:	04/2016	\$371.90
2 Months Ago:	05/2016	\$371.90
Last Month:	06/2016	\$371.90

Average per month: \$371.90

Current Monthly Income Details for the Debtor's Spouse

Spouse Income Details:

Income for the Period **01/01/2016** to **06/30/2016**.

Line 7 - Interest, dividends, and royalties

Source of Income: **Nuevo Mundo Restaurant Group, LLC**

Income by Month:

6 Months Ago:	01/2016	\$0.00
5 Months Ago:	02/2016	\$160.01
4 Months Ago:	03/2016	\$1,558.71
3 Months Ago:	04/2016	\$1,272.42
2 Months Ago:	05/2016	\$3,773.37
Last Month:	06/2016	\$3,330.56
Average per month:		\$1,682.51

Non-CMI - Social Security Act Income

Source of Income: **Social Security**

Income by Month:

6 Months Ago:	01/2016	\$720.80
5 Months Ago:	02/2016	\$720.80
4 Months Ago:	03/2016	\$720.80
3 Months Ago:	04/2016	\$720.80
2 Months Ago:	05/2016	\$720.80
Last Month:	06/2016	\$720.80
Average per month:		\$720.80

Revised 03/01/15

Name, Address, Telephone No. & I.D. No.

Marco A. Torres 214805
550 West C Street
Suite No. 1600
San Diego, CA 92101
619-849-8849
214805

UNITED STATES BANKRUPTCY COURT

SOUTHERN DISTRICT OF CALIFORNIA

325 West "F" Street, San Diego, California 92101-6991

In Re

Abraham Dolamakian
Mariam Dolamakian

BANKRUPTCY NO. 16-04156

Last four digits of Soc. Sec. or

Debtor.

Individual-Taxpayer I.D. (ITIN)/Complete EIN: **xxx-xx-1484/xxx-xx-3448**

UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF CALIFORNIA
RIGHTS AND RESPONSIBILITIES OF CHAPTER 13 DEBTORS
AND THEIR ATTORNEY
(Consumer Case)

It is important for debtors who file a bankruptcy case under Chapter 13 to understand their rights and responsibilities. It is also important that the debtors know what their attorney's responsibilities are, and understand the importance of communicating with their attorney to make the case successful. Debtors should also know that they may expect certain services to be performed by their attorney. It is also important for debtors to know the costs of attorneys' fees through the life of a plan. To assure that debtors and their attorney understand their rights and responsibilities in the bankruptcy process, the following rights and responsibilities provided by the United States Bankruptcy Court are hereby agreed to by the debtors and their attorney. (Nothing in this agreement should be construed to excuse an attorney from any ethical duties or responsibilities under Federal Rule of Bankruptcy Procedure 9011.)

UNLESS THE COURT ORDERS OTHERWISE,

The debtor must:

1. Provide accurate financial information.
2. Provide information in a timely manner.
3. Cooperate and communicate with the attorney.
4. Discuss with the attorney the debtor's objectives in filing the case.
5. Keep the trustee and attorney informed of the debtor's address and telephone number.
6. Inform the attorney of any wage garnishments or attachments of assets which occur or continue after the filing of the case.
7. Contact the attorney promptly if the debtor loses his/her job or has other financial problems.
8. Let the attorney know immediately if the debtor is sued before or during the case.
9. Inform the attorney if any tax refunds the debtor is entitled to are seized or not returned to the debtor by the IRS or Franchise Tax Board.

10. Contact the attorney before buying, refinancing, or selling real property or before entering into any long-term loan agreements to find out what approvals are required.
11. Pay any filing fees and filing expenses that may be incurred directly to the attorney.
12. Pay appropriate attorney's fees commensurate with this agreement and the United States Bankruptcy Court Guidelines regarding Chapter 13 Attorney Fees. If a court order is entered regarding attorney's fees, fees should be paid in accordance with the court's order.

To receive \$3,600, which is within the United States Bankruptcy Court's parameters for "initial fees," the attorney must:

1. Meet with the debtor to review the debtor's assets, liabilities, income and expenses.
2. Analyze the debtor's financial situation, and render advice to the debtor in determining whether to file a petition in bankruptcy.
3. Counsel the debtor regarding the advisability of filing either a Chapter 7 or Chapter 13 case, discuss both procedures with the debtor, and answer the debtor's questions.
4. Explain to the debtor how the attorney's fees and trustee's fees are paid.
5. Explain what payments will be made directly by the debtor and what payments will be made through the debtor's chapter 13 plan, with particular attention to mortgage and vehicle loan payments, as well as any other claims with accrued interest.
6. Explain to the debtor how, when, and where to make the chapter 13 plan payments.
7. Explain to the debtor that the first plan payment must be made to the Trustee within 30 days of the date the plan is filed.
8. Advise the debtor of the requirement to attend the § 341(a) Meeting of Creditors, and instruct the debtor as to the date, time and place of the meeting.
9. Advise the debtor of the necessity of maintaining liability, collision and comprehensive insurance on vehicles securing loans or leases.
10. Timely prepare, file and serve the debtor's petition, plan, schedules, statement of financial affairs, and any necessary amendments thereto, which may be required.
11. Provide an executed copy of the Rights and Responsibilities of Chapter 13 Debtors and their Attorneys and a copy of the Court's Guidelines regarding Chapter 13 Attorney Fees to the debtor.
12. Appear and represent the debtor at the § 341(a) Meeting of Creditors and any confirmation hearings.
13. Respond to the objections to plan confirmation, and where necessary, prepare, file and serve an amended plan.
14. Provide Certification of Eligibility for Discharge pursuant to Local Bankruptcy Rule 4004-1.
15. Provide such other legal services as are necessary for the administration of the case before the Bankruptcy Court, which include, but are not limited to, a continuing obligation to assist the debtor by returning telephone calls, answering questions and reviewing and sending correspondence.

Additional services may be required, but are not included in the "initial fees" of \$3,600. If necessary and when appropriate, the attorney, at the debtor's request and only with the debtor's cooperation, must provide the following services for "additional fees" described below:

1. Prepare, file and serve necessary modifications to the plan post-confirmation, which may include suspending, lowering or increasing plan payments.
2. Prepare, file and serve necessary motions to buy, sell or refinance real property and authorize use of cash collateral or assume executory contracts or unexpired leases.
3. Object to improper or invalid claims.
4. Represent the debtor in motions for relief from stay.
5. Prepare, file and serve necessary motions to avoid liens on real or personal property.
6. Prepare, file and serve necessary oppositions to motions for dismissal of case.
7. Provide such other legal services as are necessary for the administration of the case before the Bankruptcy Court, which include but are not limited to, presenting appropriate legal pleadings and making appropriate court appearances.

Should additional services be provided and "additional fees" requested, the attorney must:

1. Provide proper notice in accordance with Federal Rule of Bankruptcy Procedure 2002.
2. Advise the debtor of all "additional fees" requested and file a declaration with the court stating that counsel has so advised the debtor of the fees requested and the debtor has no objection to the requested fees.

The "Guidelines Regarding Chapter 13 Attorney Fees" provide for "additional fees" within the United States Bankruptcy Court's parameters for "additional fees" in the following amounts and include all court appearances required to pursue described actions:

Modified Plan (Post-Confirmation) **\$650**

for fees and expenses for services rendered post-confirmation for preparing, filing, noticing, and attending hearings in regard to a debtor's modified plan under section 1329 of the Bankruptcy Code (including the preparation of amended income and expenses statements and providing proof of income). (These fees should be less for modification due to clerical error or other administrative issues.)

Opposition to Motions for Relief from Stay

\$490 (Personal property)	for fees and expenses of all services rendered
\$625 (Real property)	in opposition to motions to modify or vacate automatic stay.

Obtaining Orders re: Sale or Refinance of Real Property

\$545 (By stipulation or noticed hearing)	for fees and expenses of all services rendered for order authorizing the sale or refinancing of real estate.
--	--

Objections to Claim

\$270 (Uncontested objections without hearing)	for fees and expenses of all services rendered for preparing, filing, and noticing objections to a claim. (Fees must not exceed 50% of the amount the trustee would have otherwise paid.)
\$380 (Contested objections with a hearing)	

Oppositions to Dismissal/Motions to Avoid Lien/Other Routine Pleadings **\$490**

for fees and expenses of all services rendered for preparing, filing, noticing, and attending hearings in opposition to a motion to dismiss the case, for motions to avoid lien and other routine pleadings.

Motions to Value Real Property, Treat Claim as Unsecured and Avoid Junior Lien (Lien Strips) **\$625**

for fees and expenses of all services rendered for preparing, filing, noticing, and attending hearings when there is opposition to a motion to value real property, treat claim as unsecured and avoid junior lien.

Motions to Impose/Extend Automatic Stay

\$380 (Unopposed)	for fees and expenses of all services rendered for preparing, filing,
\$545 (Opposed)	noticing and attending hearings in regard to a motion to impose/extend automatic stay.

Novel and Complex Motions and Oppositions to Motions

These types of motions and oppositions may be billed at hourly rates and counsel must file a fee application in compliance with Federal Rules of Bankruptcy Procedure and Local Bankruptcy Rules 2002 and 2016.

Initial fee charged in this case is \$ **3,600.00**

All post-filing fees will be paid through the plan, unless the court orders otherwise. The attorney may not receive fees directly from the debtor other than the initial retainer, unless the court orders otherwise. All "additional fees," as described above, may only be paid upon court authorization after compliance with the "Guidelines Regarding Chapter 13 Attorney Fees." The attorney may seek fees above the additional fees provided a fee application is noticed, filed and approved by the court.

If the debtor disputes the legal services provided or the fees charged by the attorney, the debtor may file an objection with the court and set the matter for hearing. The attorney may move to withdraw or the debtor may discharge the attorney at any time.

Dated: **July 20, 2016**

/s/ Abraham Dolamakian

Abraham Dolamakian

Debtor

Dated: **July 20, 2016**

/s/ Mariam Dolamakian

Mariam Dolamakian

Debtor

Dated: **July 20, 2016**

/s/ Marco A. Torres

Marco A. Torres 214805

Attorney for Debtor(s)

United States Bankruptcy Court
Southern District of California

In re **Abraham Dolamakian**
Mariam Dolamakian

Debtor(s)

Case No. **16-04156**
Chapter **13**

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept	\$ 3,600.00
Prior to the filing of this statement I have received	\$ 2,137.00
Balance Due	\$ 1,463.00

2. The source of the compensation paid to me was:

Debtor Other (specify):

3. The source of compensation to be paid to me is:

Debtor Other (specify):

4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. [Other provisions as needed]

Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.

United States Trustee Southern District of California Rights and Responsibilities of Chapter 13 Debtors and Their Attorney incorporated herein by reference.

6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

July 20, 2016

Date

/s/ Marco A. Torres

Marco A. Torres 214805

Signature of Attorney

The Law Office of Marco A. Torres

550 West C Street

Suite No. 1600

San Diego, CA 92101

619-849-8849 Fax: 619-955-8860

mat@mtorreslaw.com

Name of law firm

**UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF CALIFORNIA**

**NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b)
OF THE BANKRUPTCY CODE**

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total Fee \$335)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total Fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total Fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total Fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Name, Address, Telephone No. & I.D. No.

Marco A. Torres 214805
550 West C Street
Suite No. 1600
San Diego, CA 92101
619-849-8849
214805

UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF CALIFORNIA
325 West "F" Street, San Diego, California 92101-6991

In Re
Abraham Dolamakian
Mariam Dolamakian

BANKRUPTCY NO. **16-04156**

Debtor.

**CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S)
UNDER § 342(b) OF THE BANKRUPTCY CODE**

Certification of Debtor

I (We), the debtor(s), affirm that I (we) have received and read the attached notice, as required by § 342(b) of the Bankruptcy Code.

Abraham Dolamakian
Mariam Dolamakian

Printed Name(s) of Debtor(s)

Case No. (if known) **16-04156**

X <i>/s/ Abraham Dolamakian</i>	July 20, 2016
Signature of Debtor	Date
X <i>/s/ Mariam Dolamakian</i>	July 20, 2016
Signature of Joint Debtor (if any)	Date

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.
B 201B

CSD 1008 [08/21/00]

Name, Address, Telephone No. & I.D. No.

Marco A. Torres 214805

550 West C Street

Suite No. 1600

San Diego, CA 92101

619-849-8849

214805

UNITED STATES BANKRUPTCY COURT

SOUTHERN DISTRICT OF CALIFORNIA

325 West "F" Street, San Diego, California 92101-6991

In Re

**Abraham Dolamakian
Mariam Dolamakian**

BANKRUPTCY NO. **16-04156**

Debtor.

VERIFICATION OF CREDITOR MATRIX

PART I (check and complete one):

- New petition filed. Creditor diskette required. TOTAL NO. OF CREDITORS: 23
- Conversion filed on _____. *See instructions on reverse side.*
 Former Chapter 13 converting. Creditor diskette required.
 Post-petition creditors added. Scannable matrix required.
 There are no post-petition creditors. No matrix required.
- TOTAL NO. OF CREDITORS: _____
- Amendment or Balance of Schedules filed concurrently with this original scannable matrix affecting Schedule of Debts and/or Schedule of Equity Security Holders. *See instructions on reverse side.*
 Names and addresses are being ADDED.
 Names and addresses are being DELETED.
 Names and addresses are being CORRECTED.

PART II (check one):

- The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.
- The above-named Debtor(s) hereby verifies that there are no post-petition creditors affected by the filing of the conversion of this case and that the filing of a matrix is not required.

Date: July 20, 2016

/s/ Abraham Dolamakian
Abraham Dolamakian
Signature of Debtor

Date: July 20, 2016

/s/ Mariam Dolamakian
Mariam Dolamakian
Signature of Debtor

REFER TO INSTRUCTIONS ON REVERSE SIDE

CSD 1008

INSTRUCTIONS

- 1) Full compliance with Special Requirements for Mailing Addresses (CSD 1007) is required.
- 2) A creditors matrix with Verification is required whenever the following occurs:
 - a) A new petition is filed. Diskette required.
 - b) A case is converted on or after SEPTEMBER 1, 2000. (See paragraph 4b concerning post-petition creditors.)
 - c) An amendment to a case on or after SEPTEMBER 1, 2000, which adds, deletes or changes creditor address information on the debtor's Schedule of Debts and/or Schedule of Equity Security Holders. Scannable matrix format required.
- 3) The scannable matrix must be originally typed or printed. It may not be a copy.
- 4) CONVERSIONS:
 - a) When converting a Chapter 13 case filed before SEPTEMBER 1, 2000, to another chapter, ALL creditors must be listed on the mailing matrix at the time of filing and accompanied by a Verification. Diskette required.
 - b) For Chapter 7, 11, or 12 cases converted on or after SEPTEMBER 1, 2000, only post-petition creditors need be listed on the mailing matrix. The matrix and Verification must be filed with the post-petition schedule of debts and/or schedule of equity security holders. If there are no post-petition creditors, only the verification form is required. Scannable matrix format required.
- 5) AMENDMENTS AND BALANCE OF SCHEDULES:
 - a) Scannable matrix format required.
 - b) The matrix with Verification is a document separate from the amended schedules and may not be used to substitute for any portion of the schedules. IT MUST BE SUBMITTED WITH THE AMENDMENT/BALANCE OF SCHEDULES.
 - c) Prepare a separate page for each type of change required: ADDED, DELETED, or CORRECTED. On the **REVERSE** side of each matrix page, indicate which category that particular page belongs in. Creditors falling in the same category should be placed on the same page in alphabetical order.
- 6) Please refer to CSD 1007 for additional information on how to avoid matrix-related problems.